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SCHEDULE A (FEC Form 3)

PAGE 21 OF FOR LINE NUMBER: Use separate schedule(s) (check only one)

ITEMIZED RECEIPTS			for each category of the Detailed Summary Page	X 11a 12	11b	11c 13b	11d	15		
Ai Or	ny information copied from such Reports and S for commercial purposes, other than using the	Statements me name and a	ay not be sold or used by any puddress of any political committee	erson for the p to solicit cont	urpose of tributions	solicitir from su	ng contril ch comn	butions nittee.		
	NAME OF COMMITTEE (In Full) Sullivan for US Senate									
Α.	Full Name (Last, First, Middle Initial) Duncan C Smith III			Date of Re	eceint					
, \.	Mailing Address 400 Massachusetts Ave NW #1304				мом / Гом р / Гом у туму тум 12 12 2013					
	City Washington	State Zip Code nington DC 20001-6818				Transaction ID : ACFE5E0548A384238B7F				
	FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period						
	Name of Employer Smith Advocacy Group	Occupation President			and and the contract the contra	<u></u>	500			
	Receipt For: 2014 Primary General Other (specify)	Election Cy	cle-to-Date 500.00							
В.	Full Name (Last, First, Middle Initial) Virginia Reiman			Date of Receipt M M M / D B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
	Mailing Address 575 So. Elizabeth Street City State Zip Code									
	Denver	со	80209-3305	Transaction	ID : A971	1146B0	02D4590	C9B4		
	FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period						
	Name of Employer Self	Occupation Realtor			<u></u>	? <u></u> .,	2600 **	.00		
	Receipt For: 2014 Primary General Other (specify)	Election Cy	cle-to-Date 5200.00							
C.	Full Name (Last, First, Middle Initial) Dominic S Wenzel			Date of Re	eceipt					
	Mailing Address 1842 W. Northern Lights Blvd.				M F M / D F D / Y V V V V V V V V V V V V V V V V V V					
	City Anchorage	State AK	Zip Code 99517-3342	Transaction	ID : A287	F70730	D6C456	9B08		
	FEC ID number of contributing federal political committee.			Amount of	Each Re	ceipt th	· · · · · ·			
	Name of Employer Self	Occupation Dentist		500.00			.00			
	Receipt For: 2014 Primary General Other (specify)	Election Cy	cle-to-Date 500.00							
SUBTOTAL of Receipts This Page (optional)							3600.	00		
	OTAL This Period (last page this line number of		Ý V V	2	7 V					